

DECLARATION AND POWER OF ATTORNEY**DECLARATION:**

As below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: **LIGHT-BLOCKING AIR VENTS FOR EYEWEAR**, the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information, which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATIONS

| Number | Country | Date Filed | Priority Claimed (Yes/No) |
|--------|---------|------------|---------------------------|
| | | | |
| | | | |

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) regarding events which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

PRIOR UNITED STATES APPLICATIONS

| Application Serial Number | Filing Date | Status |
|---------------------------|-------------|--------|
| | | |
| | | |

I hereby declare that all statements made of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

On behalf of myself and **Dioptics Medical Products, Inc.** Assignee of entire right, title and interest, I hereby appoint the following attorney(s) and/or agent(s) with full power of substitution to act exclusively for it to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Derek J. Westberg (Reg. No. 40,872) at Customer Number 34209

All correspondence should be addressed to:

Derek J. Westberg
Law Offices of Derek J. Westberg
Two North Second Street, Suite 1390
San Jose, CA 95113

All telephone calls should be directed to Derek J. Westberg, telephone number (408) 293-9090.

| | |
|----------------------------------|--|
| Inventor's Full Name: | Henry Welling Lane |
| Inventor's Signature: | |
| Date: | |
| Residence:(City, State, Country) | San Luis Obispo, California USA |
| Citizenship: | United States of America |
| Post Office Address: | 51 Zaca Lane San Luis Obispo, CA 93401 USA |

| | |
|----------------------------------|--|
| Inventor's Full Name: | Eric Rhea |
| Inventor's Signature: | |
| Date: | |
| Residence:(City, State, Country) | San Luis Obispo, California USA |
| Citizenship: | United States of America |
| Post Office Address: | 51 Zaca Lane San Luis Obispo, CA 93401 USA |